|  |  |  |  |
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|  |  |  |  |
|  | **Non-Geographic Number Portability - Porting Failure Form** | **PF** |  |
|  | **URGENT** |  |
|  |  |  |  |
|  |  | **Failure to Port Number:** |       |  |
|  |  | Name of Communications Provider: |       |  |
|  |  | Number Portability Prefix Code: |       |  |
|  |  | Name of Contact: |       |  |
|  |  | Contact Telephone Number: |       |  |
|  |  | Contact E-mail Address / Facsimile Number: |       |  |
|  |  |  |  |  |
|  | **P****art A - Porting Failure Notification** |  |
|  | Please check the network translation has been prefixed correctly, and amend if necessary.Please retain the Customer Call Routing Plan for the number given above, pending investigation of Porting Failure.  |  |
|  |  | Name: |       |  |
|  |  | Date/Time: |       |  |
|  | **Customer without service! Response required within one hour.** |  |
|  | **Range Holder Response -** The Porting Failure Notification detailed in Part A of this form is accepted by the Range Holder, and the porting translation has been checked and confirmed as indicated. |  |
|  |  | Translation is correct: [ ]  | Translation has been corrected: [ ]  |  |  |
|  |  | Name: |       |  |
|  |  | Date/Time: |       |  |
|  |  | Comment       |  |
|  |  |  |
|  | **Part B – Emergency Restoration Request** |  |
|  | Please revert to the original Customer Call Routing Plan for the number given above. A Change or Cancel order will follow within five working days, to agree a new porting date or to cancel the order.  |  |
|  |  | Name: |       |  |
|  |  | Date/Time: |       |  |
|  | **Customer without service! Response required within one hour.** |  |
|  | **Range Holder Response** - The Emergency Restoration Request detailed in Part B above is accepted by the Range Holder, and the original Customer Call Routing Plan has been restored. |  |
|  |  | Name: |       |  |
|  |  | Date/Time Restoration was completed: |       |  |
|  |  | Reason for failure: |       |  |
|  | **Losing Communications Providers Response (Subsequent porting only)** – The LCP has noted the Emergency Restoration Request detailed in Part B above, and has restored the original Customer Call Routing Plan. |  |
|  |  | Name: |       |  |
|  |  | Date/Time Restoration was completed: |       |  |
|  |  |  |  |  |